

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

TED YOHO FOR CONGRESS

ADDRESS (number and street)

5745 SW 75TH STREET, #283

Check if different  
than previously  
reported. (ACC)

GAINESVILLE

FL

32608

2. FEC IDENTIFICATION NUMBER ▼

C

C00494583

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

FL

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
08 / 07 / 2014

through

M M / D D / Y Y Y Y  
09 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer LAURA JACKSON

Signature of Treasurer LAURA JACKSON

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
10 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

TED YOHO FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	78490.00	737046.32
(b) Total Contribution Refunds (from Line 20(d)) .....	2448.90	7698.90
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	76041.10	729347.42
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	203603.76	668741.90
(b) Total Offsets to Operating Expenditures (from Line 14).....	993.48	2641.23
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	202610.28	666100.67
8. Cash on Hand at Close of Reporting Period (from Line 27).....	180909.32	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 87

Write or Type Committee Name

**TED YOHO FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

40650.00

429665.89

**(ii) Unitemized.....**

2690.00

67602.89

**(iii) TOTAL of contributions from individuals ▶**

43340.00

497268.78

**(b) Political Party Committees.....**

650.00

650.00

**(c) Other Political Committees (such as PACs).....**

34500.00

239127.54

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS**

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

78490.00

737046.32

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

6316.11

33052.21

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS**

(add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES**

(Refunds, Rebates, etc.) .....

993.48

2641.23

**15. OTHER RECEIPTS**

(Dividends, Interest, etc.) .....

0.00

0.00

**16. TOTAL RECEIPTS (add Lines**

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)..... ▶

85799.59

772739.76

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 87

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	203603.76	668741.90
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	37303.21
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	37303.21
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	2448.90	7448.90
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	250.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2448.90	7698.90
21. OTHER DISBURSEMENTS .....	1560.00	28320.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	207612.66	742064.01

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	302722.39
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	85799.59
25. SUBTOTAL (add Line 23 and Line 24).....	388521.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	207612.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	180909.32

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**TED YOHO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HENRY AUTREY**

Mailing Address **2251 ROSSELLE STREET**

City **JACKSONVILLE** State **FL** Zip Code **32204**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2014

Transaction ID : SA11AI.12810

Amount of Each Receipt this Period

1000.00
---------

**B.** Full Name (Last, First, Middle Initial)  
**MR. STEVEN A. BENNER**

Mailing Address **1501 NW 58TH TERRACE**

City **GAINESVILLE** State **FL** Zip Code **32605**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **SCIENTIST**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2014

Transaction ID : SA11AI.12849

Amount of Each Receipt this Period

2000.00
---------

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD BIANCULLI**

Mailing Address **545 SOUTHEAST 131ST STREET**

City **OCALA** State **FL** Zip Code **34480**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OCALA RECYCLING** Occupation **PRESIDENT**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **5418.90**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2014

Transaction ID : SA11AI.12234

Amount of Each Receipt this Period

2500.00
---------

**[MEMO ITEM]**  
 AS PREVIOUSLY REPORTED

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00
---------

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>RICHARD BIANCULLI</b>		Date of Receipt M M / D D / Y Y Y Y <b>08 / 22 / 2014</b>
Mailing Address <b>545 SOUTHEAST 131ST STREET</b>		<b>Transaction ID : SA11AI.12954</b>
City <b>OCALA</b>	State <b>FL</b>	Zip Code <b>34480</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>-2500.00</b>
Name of Employer <b>OCALA RECYCLING</b>	Occupation <b>PRESIDENT</b>	<b>[MEMO ITEM]</b> <b>REDESIGNATED TO G-2014</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5418.90</b>	

Full Name (Last, First, Middle Initial) <b>RICHARD BIANCULLI</b>		Date of Receipt M M / D D / Y Y Y Y <b>08 / 22 / 2014</b>
Mailing Address <b>545 SOUTHEAST 131ST STREET</b>		<b>Transaction ID : SA11AI.12955</b>
City <b>OCALA</b>	State <b>FL</b>	Zip Code <b>34480</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2500.00</b>
Name of Employer <b>OCALA RECYCLING</b>	Occupation <b>PRESIDENT</b>	<b>[MEMO ITEM]</b> <b>REDESIGNATED FROM P-2014</b>
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5418.90</b>	

Full Name (Last, First, Middle Initial) <b>DR. DENNIS E. BROOKS</b>		Date of Receipt M M / D D / Y Y Y Y <b>08 / 25 / 2014</b>
Mailing Address <b>16209 NW 92 LANE</b>		<b>Transaction ID : SA11AI.12847</b>
City <b>GAINESVILLE</b>	State <b>FL</b>	Zip Code <b>32615</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>UNIVERSITY OF FLORIDA</b>	Occupation <b>VETERINARIAN</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAVID B BROWN

A.

Mailing Address 259 NW RHODEN GLEN

City

LAKE CITY

State

FL

Zip Code

32055

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		22		2014

Transaction ID : SA11AI.12934

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

EDWARD E BURR

B.

Mailing Address 7807 BAYMEADOWS RD. E  
STE. 205

City

JACKSONVILLE

State

FL

Zip Code

32258

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GREEN POINTE

Occupation

PRESIDENT/CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		09		2014

Transaction ID : SA11AI.12805

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

STEPHEN CADE

C.

Mailing Address PO BOX 559

City

NEWBERRY

State

FL

Zip Code

32669

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PARTS

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1663.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		09		2014

Transaction ID : SA11AI.12800

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2450.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 87  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>MARY CADE</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>08 / 09 / 2014</div> </div>
Mailing Address <b>529 NORTHWEST 58TH STREET</b>		Transaction ID : <b>SA11AI.12799</b>
City <b>GAINESVILLE</b>	State <b>FL</b>	
Zip Code <b>32607</b>		
FEC ID number of contributing federal political committee. <div>C</div>		
Name of Employer <b>NONE</b>	Occupation <b>RETIRED</b>	Amount of Each Receipt this Period <div>100.00</div>
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>2700.00</div>	

Full Name (Last, First, Middle Initial) <b>J. ROBERT CADE</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>08 / 11 / 2014</div> </div>
Mailing Address <b>529 NW 58TH ST.</b>		Transaction ID : <b>SA11AI.12809</b>
City <b>GAINESVILLE</b>	State <b>FL</b>	
Zip Code <b>32607</b>		
FEC ID number of contributing federal political committee. <div>C</div>		
Name of Employer <b>INFORMATION REQUESTED</b>	Occupation <b>INFORMATION REQUESTED</b>	Amount of Each Receipt this Period <div>2500.00</div>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>2500.00</div>	

Full Name (Last, First, Middle Initial) <b>MR. BEN CAMPEN</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>08 / 25 / 2014</div> </div>
Mailing Address <b>2160 PARK ST. STE. 600</b>		Transaction ID : <b>SA11AI.12848</b>
City <b>JACKSONVILLE</b>	State <b>FL</b>	
Zip Code <b>32204</b>		
FEC ID number of contributing federal political committee. <div>C</div>		
Name of Employer <b>BEN CAMPEN AUCTIONEERS</b>	Occupation <b>OWNER</b>	Amount of Each Receipt this Period <div>1000.00</div>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>2000.00</div>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<div>3600.00</div>
<b>TOTAL</b> This Period (last page this line number only).....	<div></div>



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ROBERT C. CHILDRESS III****A.**

Mailing Address POST OFFICE BOX 1233

City

BRANFORD

State

FL

Zip Code

32008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		22		2014

**Transaction ID : SA11AI.12948**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**LEE CREWS****B.**

Mailing Address POST OFFICE BOX 43

City

GAINESVILLE

State

FL

Zip Code

32602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		25		2014

**Transaction ID : SA11AI.12844**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**ALBERT J. DUNLAP****C.**

Mailing Address 2180 SW 55TH STREET RD

City

OCALA

State

FL

Zip Code

34471

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		15		2014

**Transaction ID : SA11AI.12827**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2825.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

JUDITH A. DUNLAP

A.

Mailing Address 2180 SW 55TH STREET RD

City

OCALA

State

FL

Zip Code

34471

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		15		2014

Transaction ID : SA11AI.12828

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

MR. KENNETH FELD

B.

Mailing Address 9609 HALTER CT

City

POTOMAC

State

MD

Zip Code

20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FELD ENTERTAINMENT, INC.

Occupation

CHAIRMAN &amp; CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		13		2014

Transaction ID : SA11AI.12815

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

MR. KENNETH FELD

C.

Mailing Address 9609 HALTER CT

City

POTOMAC

State

MD

Zip Code

20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FELD ENTERTAINMENT, INC.

Occupation

CHAIRMAN &amp; CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		13		2014

Transaction ID : SA11AI.13101

Amount of Each Receipt this Period

-900.00

[MEMO ITEM]

REATTRIBUTED TO FELD, BONNIE

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BONNIE T FELD****A.**

Mailing Address 9609 HALTER CT.

City

POTOMAC

State

MD

Zip Code

20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2014

Transaction ID : SA11AI.13102

Amount of Each Receipt this Period

900.00

**[MEMO ITEM]**

REATTRIBUTED FROM FELD, KENNETH

Full Name (Last, First, Middle Initial)

**T. MARTIN FIORENTINO****B.**Mailing Address 1520 SAWGRASS VILLAGE DRIVE  
#373

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FIORENTINO GROUP

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2014

Transaction ID : SA11AI.12806

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**PAUL FLORENCE****C.**Mailing Address 5745 SOUTHWEST 75TH STREET  
#305

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2014

Transaction ID : SA11AI.12938

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

DANIEL H GALPERN

A.

Mailing Address 66 LEONARD ST.

APT. B

City

NEW YORK

State

NY

Zip Code

10013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PRIVATE EQUITY FUND

Occupation

BANKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		09		2014

Transaction ID : SA11AI.12802

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

WILLIAM C. GENTRY

B.

Mailing Address 136 EAST BAY STREET

City

JACKSONVILLE

State

FL

Zip Code

32202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		13		2014

Transaction ID : SA11AI.12816

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MR. MICHAEL F JOYNER

C.

Mailing Address PO BOX 2

City

MORRISTON

State

FL

Zip Code

32688

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Transaction ID : SA11AI.12973

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1600.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHRIS P KELLY

Mailing Address 1322 SW 12 AVE

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		12		2014

Transaction ID : SA11Al.12944

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

ALBERT J KINARD SR.

Mailing Address 7085 TONGA DRIVE

City

JACKSONVILLE

State

FL

Zip Code

32216

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		09		2014

Transaction ID : SA11Al.12793

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

MR. JOHN LACQUEY

Mailing Address 8125 264TH ST.

City

BRANFORD

State

FL

Zip Code

32008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

LANDSCAPE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		25		2014

Transaction ID : SA11Al.12845

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MRS. CAROLYN S. LAND

A.

Mailing Address 722 SE HERITAGE CT.

City

BRANFORD

State

FL

Zip Code

32008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

660.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2014

Transaction ID : SA11Al.12971

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

MRS. KRISTEN T. LONG

B.

Mailing Address 3406 TALISMAN DR

City

MIDDLESBURG

State

FL

Zip Code

32068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ISLAND MARINE CORP

Occupation

HUMAN RESOURCES

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2850.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		09		2014

Transaction ID : SA11Al.12796

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

MRS. KRISTEN T. LONG

C.

Mailing Address 3406 TALISMAN DR

City

MIDDLESBURG

State

FL

Zip Code

32068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ISLAND MARINE CORP

Occupation

HUMAN RESOURCES

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2850.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		09		2014

Transaction ID : SA11Al.13099

Amount of Each Receipt this Period

-250.00

[MEMO ITEM]

REDESIGNATED TO G-2014

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2625.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MRS. KRISTEN T. LONG

Mailing Address 3406 TALISMAN DR

City

MIDDLESBURG

State

FL

Zip Code

32068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ISLAND MARINE CORP

Occupation

HUMAN RESOURCES

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		09		2014

Transaction ID : SA11AI.13100

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

REDESIGNATED FROM P-2014

Full Name (Last, First, Middle Initial)

DAVID NEVILL

Mailing Address 27608 NORTHWEST 46TH AVENUE

City

NEWBERRY

State

FL

Zip Code

32669

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		14		2014

Transaction ID : SA11AI.12825

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

HARRIS NEWMAN

Mailing Address 103 W RIVER RD.

City

RUMSON

State

NJ

Zip Code

07760

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PRIVATE EQUITY FUND

Occupation

BANKER

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		09		2014

Transaction ID : SA11AI.12794

Amount of Each Receipt this Period

2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3100.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HARRIS NEWMAN****A.**

Mailing Address 103 W RIVER RD.

City

RUMSON

State

NJ

Zip Code

07760

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PRIVATE EQUITY FUND

Occupation

BANKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2014

**Transaction ID : SA11AI.12795**

Amount of Each Receipt this Period

2400.00

Full Name (Last, First, Middle Initial)

**MR. GEORGE C. SHUMAN****B.**

Mailing Address 1700 SE 52ND CT.

City

OCALA

State

FL

Zip Code

34471

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GEORGE C. SHUMAN

Occupation

CEO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2014

**Transaction ID : SA11AI.12967**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**MR. MARK STARR****C.**

Mailing Address 8436 NW 4TH PL.

City

GAINESVILLE

State

FL

Zip Code

32607

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FLORIDA CREDIT UNION

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2014

**Transaction ID : SA11AI.12835**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2900.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 87  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
           12       13a       13b       14       15

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NAME OF COMMITTEE (In Full)  
**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>MR. MARK STARR</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>09 / 18 / 2014</div> </div>	
Mailing Address 8436 NW 4TH PL.			<b>Transaction ID : SA11Al.12947</b>	
City GAINESVILLE	State FL	Zip Code 32607	Amount of Each Receipt this Period <div> <div></div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer FLORIDA CREDIT UNION		Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <div> <div></div> <div>1500.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>KENT STERMON</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>08 / 09 / 2014</div> </div>	
Mailing Address 413 ST. JOHNS GOLF DR.			<b>Transaction ID : SA11Al.12790</b>	
City ST. AUGUSTINE	State FL	Zip Code 32092	Amount of Each Receipt this Period <div> <div></div> <div>2600.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer TOTAL MILITARY MANAGEMENT		Occupation COO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <div> <div></div> <div>2600.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>CHRISTIE STERMON</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>08 / 09 / 2014</div> </div>	
Mailing Address 413 ST. JOHNS GOLF DR.			<b>Transaction ID : SA11Al.12791</b>	
City ST. AUGUSTINE	State FL	Zip Code 32092	Amount of Each Receipt this Period <div> <div></div> <div>1400.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <div> <div></div> <div>1400.00</div> </div>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<div> <div></div> <div>4250.00</div> </div>
<b>TOTAL</b> This Period (last page this line number only).....	<div> <div></div> </div>

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHARLES W. TATUM

A.

Mailing Address POST OFFICE DRAWER A

City

LAWTEY

State

FL

Zip Code

32058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TATUM BROTHERS LUMBER COMPANY

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2014

Transaction ID : SA11AI.12821

Amount of Each Receipt this Period

2600.00

[MEMO ITEM]

REATTRIBUTED FROM TATUM, SYLVIA

Full Name (Last, First, Middle Initial)

SYLVIA TATUM

B.

Mailing Address 22512 CR 200A

City

LAWTEY

State

FL

Zip Code

32058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TATUM BROS LUMBER COMPANY

Occupation

SECRETARY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5460.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.12608

Amount of Each Receipt this Period

1800.00

[MEMO ITEM]

AS PREVIOUSLY REPORTED

Full Name (Last, First, Middle Initial)

SYLVIA TATUM

C.

Mailing Address 22512 CR 200A

City

LAWTEY

State

FL

Zip Code

32058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TATUM BROS LUMBER COMPANY

Occupation

SECRETARY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2860.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2014

Transaction ID : SA11AI.12822

Amount of Each Receipt this Period

-260.00

[MEMO ITEM]

REDESIGNATED TO G-2014

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

SYLVIA TATUM

A.

Mailing Address 22512 CR 200A

City

LAWTEY

State

FL

Zip Code

32058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TATUM BROS LUMBER COMPANY

Occupation

SECRETARY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2860.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2014

Transaction ID : SA11AI.12823

Amount of Each Receipt this Period

260.00

[MEMO ITEM]

REDESIGNATED FROM P-2014

Full Name (Last, First, Middle Initial)

SYLVIA TATUM

B.

Mailing Address 22512 CR 200A

City

LAWTEY

State

FL

Zip Code

32058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TATUM BROS LUMBER COMPANY

Occupation

SECRETARY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.12609

Amount of Each Receipt this Period

2600.00

[MEMO ITEM]

AS PREVIOUSLY REPORTED

Full Name (Last, First, Middle Initial)

SYLVIA TATUM

C.

Mailing Address 22512 CR 200A

City

LAWTEY

State

FL

Zip Code

32058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TATUM BROS LUMBER COMPANY

Occupation

SECRETARY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2860.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2014

Transaction ID : SA11AI.12820

Amount of Each Receipt this Period

-2600.00

[MEMO ITEM]

REATTRIBUTED TO TATUM, CHARLES

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 20 OF 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MARIAN TILLMAN

Mailing Address 23212 NE 69TH AVE

City

MELROSE

State

FL

Zip Code

32666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DUSTIN'S BAR-B-QOccupation  
OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		21		2014

Transaction ID : SA11AI.12837

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. ROBERT TURNAGE

Mailing Address 2820 WINDEMERE COURT

City

MIDDLEBURG

State

FL

Zip Code

32068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ISLANDS MECHANICALOccupation  
OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		09		2014

Transaction ID : SA11AI.12803

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. ROBERT TURNAGE

Mailing Address 2820 WINDEMERE COURT

City

MIDDLEBURG

State

FL

Zip Code

32068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ISLANDS MECHANICALOccupation  
OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		09		2014

Transaction ID : SA11AI.12804

Amount of Each Receipt this Period

2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5700.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

SEAN P. TURNAGE

Mailing Address 2804 WINDEMERE CT

City

MIDDLEBURGH

State

FL

Zip Code

32068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ISLAND MECHANICAL INC.Occupation  
CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		15		2014

Transaction ID : SA11AI.12829

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

MR. LANE B. WATKINS

Mailing Address 159 SW SYDNEY NICOLE CT.

City

LAKE CITY

State

FL

Zip Code

32024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JACOBSOccupation  
ENGINEER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		10		2014

Transaction ID : SA11AI.12813

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

MR. LANE B. WATKINS

Mailing Address 159 SW SYDNEY NICOLE CT.

City

LAKE CITY

State

FL

Zip Code

32024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JACOBSOccupation  
ENGINEER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		22		2014

Transaction ID : SA11AI.12949

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

40650.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☒ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**TED YOHO FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**LAFAYETTE REPUBLICAN EXECUTIVE COMMITTEE**

Mailing Address 1135 NE TANSY RD

City State Zip Code  
MAYO FL 32066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 24 2014

Transaction ID : SA11B.12965

Amount of Each Receipt this Period

500.00

PERMISSIBLE FUNDS

B. Full Name (Last, First, Middle Initial)  
**REPUBLICAN CLUB OF OCALA PALMS**

Mailing Address 1992 NORTHWEST 50TH CIRCLE

City State Zip Code  
OCALA FL 34482

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

150.00

Date of Receipt

M M / D D / Y Y Y Y  
09 24 2014

Transaction ID : SA11B.12966

Amount of Each Receipt this Period

150.00

PERMISSIBLE FUNDS

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

650.00

650.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**TED YOHO FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**AIR LINE PILOTS ASSOCIATION PAC**

Mailing Address 1625 MASSACHUSETTS AVE. NW

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C** C00035451

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11C.12826

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)  
**AMERICAN AIRLINES INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1101 17TH STREET N.W.  
SUITE 600

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C** C00107300

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11C.12953

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
**BLOOMIN' BRANDS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 2202 N. WESTSHORE BLVD.  
5TH FLOOR

City TAMPA	State FL	Zip Code 33607
---------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C** C00253153

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11C.12951

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional).....

4000.00

**TOTAL** This Period (last page this line number only).....





# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**TED YOHO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GOP GENERATION Y FUND**

Mailing Address PO BOX 9055

City	State	Zip Code
PEORIA	IL	61612

FEC ID number of contributing  
federal political committee.

**C** C00448191

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		18		2014

Transaction ID : SA11C.12830

Amount of Each Receipt this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVE. NW  
 SUITE 500 WEST

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing  
federal political committee.

**C** C00096156

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4227.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		09		2014

Transaction ID : SA11C.12808

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**I-PAC JAX, INC.**

Mailing Address 6944 ST. AUGUSTINE RD.

City	State	Zip Code
JACKSONVILLE	FL	32217

FEC ID number of contributing  
federal political committee.

**C** C00557926

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		11		2014

Transaction ID : SA11C.12811

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

JBS USA LLC PAC

Mailing Address 1770 PROMONTORY CIRCLE

City

GREELEY

State

CO

Zip Code

80634

FEC ID number of contributing  
federal political committee.

C C00394650

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		12		2014

Transaction ID : SA11C.12941

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

KELLEY DRYE &amp; WARREN POLITICAL ACTION COMMITTEE

Mailing Address 3050 K STREET NW SUITE 400

City

WASHINGTON

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C C00301929

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		09		2014

Transaction ID : SA11C.12801

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 600 14TH STREET, NW  
SUITE 800

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C C00236489

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Transaction ID : SA11C.12962

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

3500.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**TED YOHO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LAND O'LAKES, INC., PAC**

Mailing Address **P.O. BOX 64101**

City <b>ST. PAUL</b>	State <b>MN</b>	Zip Code <b>55164</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00009423**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 29 / 2014

Transaction ID : **SA11C.12968**

Amount of Each Receipt this Period

<b>2000.00</b>
----------------

**B.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC**

Mailing Address **2121 CRYSTAL DRIVE  
 SUITE 100**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22202</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : **SA11C.12831**

Amount of Each Receipt this Period

<b>1000.00</b>
----------------

**C.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC**

Mailing Address **2121 CRYSTAL DRIVE  
 SUITE 100**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22202</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 29 / 2014

Transaction ID : **SA11C.12969**

Amount of Each Receipt this Period

<b>1000.00</b>
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**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

<b>4000.00</b>
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# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**TED YOHO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND**

Mailing Address 11250 WAPLES MILL ROAD

City	State	Zip Code
FAIRFAX	VA	22030

FEC ID number of contributing federal political committee.

**C** C00053553

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 12 / 2014

Transaction ID : SA11C.12940

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**OUR COUNTRY DESERVES BETTER PAC - TEAPARTYEXPRESS.ORG**

Mailing Address PO BOX 984

City	State	Zip Code
WILLOWS	CA	95988

FEC ID number of contributing federal political committee.

**C** C00454074

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 22 / 2014

Transaction ID : SA11C.12838

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
**REALTORS POLITICAL ACTION COMMITTEE (RPAC)**

Mailing Address 430 N MICHIGAN AVE

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing federal political committee.

**C** C00030718

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2014

Transaction ID : SA11C.12974

Amount of Each Receipt this Period

1000.00

7000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SAFARI CLUB INTERNATIONAL PAC (SCI-PAC)**

Mailing Address 4800 W. GATES PASS ROAD

City	State	Zip Code
TUCSON	AZ	85745

FEC ID number of contributing federal political committee.

**C** C00122101

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 09 / 2014

Transaction ID : SA11C.12807

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**SCALISE FOR CONGRESS**

Mailing Address PO BOX 23219

City	State	Zip Code
JEFFERSON	LA	70183

FEC ID number of contributing federal political committee.

**C** C00394957

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : SA11C.12960

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**SEAWORLD PARKS & ENTERTAINMENT INC PAC**

Mailing Address 9205 SOUTH PARK CENTER LOOP  
 SUITE 400

City	State	Zip Code
ORLANDO	FL	32819

FEC ID number of contributing federal political committee.

**C** C00501163

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.12975

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4000.00

34500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 30 OF 87

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

FRESHMAN AGRICULTURAL REPUBLICAN MEMBERS TRUST AKA FARM TRUST

A.

Mailing Address PO BOX 30844

City

BETHESDA

State

MD

Zip Code

20824

FEC ID number of contributing  
federal political committee.

C C00493783

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

28884.77

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2014

Transaction ID : SA12.12976

Amount of Each Receipt this Period

6316.11

TRANSFER OF NET JFC FUNDS

Full Name (Last, First, Middle Initial)

NATIONAL SORGHUM PRODUCERS POLITICAL ACTION COMMITTEE

B.

Mailing Address 4201 N INTERSTATE 27

City

LUBBOCK

State

TX

Zip Code

79403

FEC ID number of contributing  
federal political committee.

C C00475673

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1714.28

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2014

Transaction ID : SA12.13092

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]  
TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)

MINNESOTA CORN GROWERS ASSOCIATION FEDERAL PAC

C.

Mailing Address 738 1ST AVE E

City

SHAKOPEE

State

MN

Zip Code

55379

FEC ID number of contributing  
federal political committee.

C C00416982

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA12.13093

Amount of Each Receipt this Period

250.00

[MEMO ITEM]  
TRANSFER IN AFFILIATED

SUBTOTAL of Receipts This Page (optional).....

6316.11

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 31 OF 87

(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

LAND O'LAKES, INC., PAC

Mailing Address P.O. BOX 64101

City

ST. PAUL

State

MN

Zip Code

55164

FEC ID number of contributing  
federal political committee.

C C00009423

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA12.13094

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)

CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

Mailing Address 316 PENNSYLVANIA AVE SE  
SUITE 401

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C C00503680

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1857.15

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA12.13095

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)

FUNDING DEVELOPING LEADERSHIP POLITICAL ACTION COMMITTEE AKA FDL PAC

Mailing Address 701 8TH STREET, NW  
SUITE 500

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00489906

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		08		2014

Transaction ID : SA12.13096

Amount of Each Receipt this Period

2000.00

[MEMO ITEM]

TRANSFER IN AFFILIATED

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 87

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 SYNGENTA CORPORATION EMPLOYEE POLITICAL ACTION COMMITTEE (SYNGENTA PAC)

**A.**

Mailing Address 1775 PENNSYLVANIA AVENUE NW  
 SUITE 600

City State Zip Code  
 WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00363945

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 08 15 2014

Transaction ID : SA12.13097

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**  
 TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)  
**USA RICE FEDERATION PAC**

**B.**

Mailing Address 2101 WILSON BLVD, STE 610

City State Zip Code  
 ARLINGTON VA 22201

FEC ID number of contributing  
federal political committee.

**C** C00308478

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3071.43

Date of Receipt

M M / D D / Y Y Y Y  
 08 19 2014

Transaction ID : SA12.13098

Amount of Each Receipt this Period

571.43

**[MEMO ITEM]**  
 TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

6316.11



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 87

(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**TED YOHO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>CAROLYN YOHO</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>22</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	09		22		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
09		22		2014									
Mailing Address 8209 SW 95TH LANE		<b>Transaction ID : SA14.13090</b>											
City GAINESVILLE	State FL	Zip Code 32608											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>688.37</div>											
Name of Employer NONE	Occupation RETIRED	REIMBURSE PERSONAL EXPENSES MISTAKENLY PAID BY THE CAMPAIGN											
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>993.48</div>												

  

<b>B.</b> Full Name (Last, First, Middle Initial) <b>CAROLYN YOHO</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>22</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	09		22		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
09		22		2014									
Mailing Address 8209 SW 95TH LANE		<b>Transaction ID : SA14.13091</b>											
City GAINESVILLE	State FL	Zip Code 32608											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>305.11</div>											
Name of Employer NONE	Occupation RETIRED	REIMBURSE PERSONAL EXPENSES MISTAKENLY PAID BY THE CAMPAIGN											
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>993.48</div>												

  

<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y					
M M M	/	D D D	/	Y Y Y Y Y Y									
Mailing Address													
City	State	Zip Code											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div></div>											
Name of Employer	Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div></div>												

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....		<div>993.48</div>
<b>TOTAL</b> This Period (last page this line number only).....		<div>993.48</div>

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RAISA ALSTODT**

Mailing Address 7629 SW 19TH PL

City	State	Zip Code
GAINESVILLE	FL	32607

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

201.78
--------

Transaction ID : SB17.12892

**B. RAISA ALSTODT**

Mailing Address 7629 SW 19TH PL

City	State	Zip Code
GAINESVILLE	FL	32607

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

180.01
--------

Transaction ID : SB17.12893

[MEMO ITEM]

**C. RAISA ALSTODT**

Mailing Address 7629 SW 19TH PL

City	State	Zip Code
GAINESVILLE	FL	32607

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

Amount of Each Disbursement this Period

35.60
-------

Transaction ID : SB17.12919

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

237.38

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address POST OFFICE BOX 360001

City	State	Zip Code
FT. LAUDERDALE	FL	33336

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

651.05
--------

Transaction ID : SB17.12867

**B. HILL COUNTRY BBQ**

Mailing Address 410 7TH ST NW

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

538.56
--------

Transaction ID : SB17.12868

[MEMO ITEM]

**C. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

47.90
-------

Transaction ID : SB17.12870

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

651.05
--------

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER CAB**

Mailing Address 182 HOWARD ST

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
TRAVEL EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

39.00
-------

Transaction ID : SB17.12871

**[MEMO ITEM]****B. AMERICAN EXPRESS**

Mailing Address POST OFFICE BOX 360001

City	State	Zip Code
FT. LAUDERDALE	FL	33336

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		17		2014

Amount of Each Disbursement this Period

159.69
--------

Transaction ID : SB17.13000

**C. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		17		2014

Amount of Each Disbursement this Period

83.72
-------

Transaction ID : SB17.13001

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

159.69
--------

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**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMERICAN GRASS ASSASSIN**

Mailing Address 4642 SW 45TH LN

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
TRAVEL EXPENSE-NO ITEMIZATION NECESSARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		08		2014

Amount of Each Disbursement this Period

505.10
--------

Transaction ID : SB17.12865

**B. BALLOONS BY FLORALLY YOURS**

Mailing Address 2903 NE 11TH TERR

City	State	Zip Code
GAINESVILLE	FL	32609

Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		21		2014

Amount of Each Disbursement this Period

322.30
--------

Transaction ID : SB17.12905

**C. BRADFORD COUNTY REPUBLICAN EXECUTIVE COMMITTEE**

Mailing Address BRADFORD COUNTY

City	State	Zip Code
STARKE	FL	32091

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2014

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : SB17.12863

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1077.40

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. KATHRYN CAMMACK**

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

248.00
--------

Transaction ID : SB17.12889

**B. KATHRYN CAMMACK**

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

285.87
--------

Transaction ID : SB17.12995

**C. KATHRYN CAMMACK**

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2014

Amount of Each Disbursement this Period

41.91
-------

Transaction ID : SB17.13011

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

575.78

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. KATHRYN CAMMACK**

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2014

Amount of Each Disbursement this Period

11.92
-------

Transaction ID : SB17.13012

[MEMO ITEM]

**B. CHASE CARD SERVICES**

Mailing Address POST OFFICE BOX 15153

City	State	Zip Code
WILMINGTON	DE	19886

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

17790.54
----------

Transaction ID : SB17.12898

**C. NAPOLATANO'S**

Mailing Address 606 NORTHWEST 75TH STREET

City	State	Zip Code
GAINESVILLE	FL	32607

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

40.00
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Transaction ID : SB17.13040

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

17790.54
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. OFFICE MAX**

Mailing Address 3642 SOUTHWEST ARCHER ROAD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

461.30
--------

Transaction ID : SB17.13041

[MEMO ITEM]

**B. ENTERCOM GAINESVILLE/WSKY-FM**Mailing Address 3600 NORTHWEST 43RD STREET  
BLDG. B

City	State	Zip Code
GAINESVILLE	FL	32606

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

2844.00
---------

Transaction ID : SB17.13043

[MEMO ITEM]

**C. WJTK**

Mailing Address 229 SW MAIN BLVD

City	State	Zip Code
LAKE CITY	FL	32025

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

3043.00
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Transaction ID : SB17.13044

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WNFB**

Mailing Address 2485 S MARION AVE

City	State	Zip Code
LAKE CITY	FL	32025

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

1047.20
---------

Transaction ID : SB17.13045

[MEMO ITEM]

**B. CHESAPEAKE PORTSMOUTH BROADCASTING**

Mailing Address 2202 JOLIFF ROAD

City	State	Zip Code
CHESAPEAKE	VA	23321

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

4345.00
---------

Transaction ID : SB17.13046

[MEMO ITEM]

**C. DOMINO'S PIZZA**

Mailing Address SOUTHWEST 75TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

41.56
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Transaction ID : SB17.13047

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BULL FEATHERS**

Mailing Address 410 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

178.64
--------

Transaction ID : SB17.13048

**[MEMO ITEM]****B. CLAY TODAY NEWSPAPER**

Mailing Address 1560 KINGSLEY AVENUE

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

1500.00
---------

Transaction ID : SB17.13050

**[MEMO ITEM]****C. PUBLIX SUPERMARKETS, INC.**

Mailing Address 5801 SOUTHWEST 75TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

98.00
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Transaction ID : SB17.13051

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CHICK-FIL-A**

Mailing Address 5200 BUFFINGTON RD

City	State	Zip Code
ATLANTA	GA	30349

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

323.05
--------

Transaction ID : SB17.13052

[MEMO ITEM]

**B. FACEBOOK**

Mailing Address 156 UNIVERSITY AVE

City	State	Zip Code
PALO ALTO	CA	94301

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

301.79
--------

Transaction ID : SB17.13054

[MEMO ITEM]

**C. UNITED STATES POST OFFICE**

Mailing Address 4600 SOUTHWEST 34TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

245.00
--------

Transaction ID : SB17.13055

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UPS STORE**

Mailing Address 5745 SOUTHWEST 75TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
SHIPPING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

45.40
-------

Transaction ID : SB17.13056

**[MEMO ITEM]****B. WALMART**

Mailing Address 3570 SOUTHWEST ARCHER ROAD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
TELEPHONE SERVICE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

370.88
--------

Transaction ID : SB17.13058

**[MEMO ITEM]****C. MAILCHIMP.COM**Mailing Address 512 MEANS STREET  
SUITE 404

City	State	Zip Code
ATLANTA	GA	30318

Purpose of Disbursement  
E-MARKETING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

30.00
-------

Transaction ID : SB17.13059

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SPEEDYSIGNS.COM**Mailing Address 162 SOUTHWEST SPENCER COURT  
SUITE 101

City LAKE CITY State FL Zip Code 32024

Purpose of Disbursement  
CAMPAIGN SIGNS/PRINTING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

94.59
-------

Transaction ID : SB17.13060

**[MEMO ITEM]****B. SONNY'S BBQ**

Mailing Address 3635 SOUTHWEST ARCHER ROAD

City GAINESVILLE State FL Zip Code 32608

Purpose of Disbursement  
EVENT CATERING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

466.96
--------

Transaction ID : SB17.13061

**[MEMO ITEM]****C. NEW AGE GAINESVILLE**

Mailing Address 1181 HWY 315

City WILKES BARRE TOWNS State PA Zip Code 18702

Purpose of Disbursement  
ADVERTISING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

1555.00
---------

Transaction ID : SB17.13062

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. GODADDY.COM**

Mailing Address 375 COLLINS ROAD NORTHEAST

City	State	Zip Code
CEDAR RAPIDS	IA	52402

Purpose of Disbursement  
WEB HOSTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

4973.01
---------

Transaction ID : SB17.13064

**[MEMO ITEM]****B. CHASE CARD SERVICES**

Mailing Address POST OFFICE BOX 15153

City	State	Zip Code
WILMINGTON	DE	19886

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		21		2014

Amount of Each Disbursement this Period

4973.01
---------

Transaction ID : SB17.12904

**C. COX MEDIA GROUP**

Mailing Address 6205 PEACHTREE DUNWOODY RD

City	State	Zip Code
ATLANTA	GA	30328

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		21		2014

Amount of Each Disbursement this Period

4947.00
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Transaction ID : SB17.13034

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4973.01

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CHASE CARD SERVICES**

Mailing Address POST OFFICE BOX 15153

City	State	Zip Code
WILMINGTON	DE	19886

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2014

Amount of Each Disbursement this Period

14387.47
----------

Transaction ID : SB17.12907

**B. WJXT-TV**

Mailing Address 4 BROADCAST PL

City	State	Zip Code
JACKSONVILLE	FL	32207

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2014

Amount of Each Disbursement this Period

14322.50
----------

Transaction ID : SB17.13036

[MEMO ITEM]

**C. STRAIGHT TALK**

Mailing Address 9700 NW 112TH AVE

City	State	Zip Code
MIAMI	FL	33178

Purpose of Disbursement  
TELEPHONE SERVICE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2014

Amount of Each Disbursement this Period

45.78
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Transaction ID : SB17.13037

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

14387.47

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DOMINO'S PIZZA**

Mailing Address SOUTHWEST 75TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2014

Amount of Each Disbursement this Period

21563.22
----------

Transaction ID : SB17.13038

**[MEMO ITEM]****B. CHASE CARD SERVICES**

Mailing Address POST OFFICE BOX 15153

City	State	Zip Code
WILMINGTON	DE	19886

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

21563.22
----------

Transaction ID : SB17.12987

**C. WJTK**

Mailing Address 229 SW MAIN BLVD

City	State	Zip Code
LAKE CITY	FL	32025

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

998.75
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Transaction ID : SB17.13068

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

21563.22
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WNFB**

Mailing Address 2485 S MARION AVE

City	State	Zip Code
LAKE CITY	FL	32025

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

999.60
--------

Transaction ID : SB17.13069

**[MEMO ITEM]****B. WTLV**

Mailing Address 1070 E ADAM ST

City	State	Zip Code
JACKSONVILLE	FL	32202

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

10200.00
----------

Transaction ID : SB17.13070

**[MEMO ITEM]****C. GODADDY.COM**

Mailing Address 375 COLLINS ROAD NORTHEAST

City	State	Zip Code
CEDAR RAPIDS	IA	52402

Purpose of Disbursement  
WEB HOSTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

163.04
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Transaction ID : SB17.13071

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 50 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FACEBOOK**

Mailing Address 156 UNIVERSITY AVE

City	State	Zip Code
PALO ALTO	CA	94301

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

1928.76

Transaction ID : SB17.13072

[MEMO ITEM]

**B. NEWBERRY LIQUOR**

Mailing Address 24920 NEWBERRY LN

City	State	Zip Code
NEWBERRY	FL	32669

Purpose of Disbursement  
EVENT BEVERAGES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

424.83

Transaction ID : SB17.13073

[MEMO ITEM]

**C. PUBLIX SUPERMARKETS, INC.**

Mailing Address 5801 SOUTHWEST 75TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

194.99

Transaction ID : SB17.13074

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....

0.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. 43RD STREET DELI & BREAKFAST HOUSE**

Mailing Address 3483 SOUTHWEST WILLISTON ROAD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

163.86
--------

Transaction ID : SB17.13076

[MEMO ITEM]

**B. BEST BUY**

Mailing Address ARCHER ROAD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

99.37
-------

Transaction ID : SB17.13077

[MEMO ITEM]

**C. NAPOLATANO'S**

Mailing Address 606 NORTHWEST 75TH STREET

City	State	Zip Code
GAINESVILLE	FL	32607

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

898.00
--------

Transaction ID : SB17.13078

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CHESAPEAKE PORTSMOUTH BROADCASTING**

Mailing Address 2202 JOLIFF ROAD

City	State	Zip Code
CHESAPEAKE	VA	23321

Purpose of Disbursement  
ADVERTISING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB17.13079

**[MEMO ITEM]****B. ALAMO**

Mailing Address 3880 NW 39TH AVE STE G

City	State	Zip Code
GAINESVILLE	FL	32609

Purpose of Disbursement  
TRAVEL EXPENSE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

352.33
--------

Transaction ID : SB17.13081

**[MEMO ITEM]****C. SONOMA RESTAURANT**

Mailing Address 233 PENNSYLVANIA AVENUE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
EVENT CATERING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

726.18
--------

Transaction ID : SB17.13086

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NEW AGE GAINESVILLE**

Mailing Address 1181 HWY 315

City	State	Zip Code
WILKES BARRE TOWNS	PA	18702

Purpose of Disbursement  
ADVERTISING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

1440.00

Transaction ID : SB17.13087

[MEMO ITEM]

**B. EVENTHELPER.COM**

Mailing Address 565 BRUNSWICK E STE 11

City	State	Zip Code
GRASS VALLEY	CA	95945

Purpose of Disbursement  
EVENT INSURANCE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

104.25

Transaction ID : SB17.13088

[MEMO ITEM]

**C. CONSERVATIVE COUNTDOWN**

Mailing Address 118 N PATTERSON ST

City	State	Zip Code
VALDOSTA	GA	31601

Purpose of Disbursement  
ADVERTISING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		21		2014

Amount of Each Disbursement this Period

240.00

Transaction ID : SB17.12906

**SUBTOTAL** of Disbursements This Page (optional).....

240.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. COX MEDIA GROUP**

Mailing Address 6205 PEACHTREE DUNWOODY RD

City	State	Zip Code
ATLANTA	GA	30328

Purpose of Disbursement  
MEDIA BUY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

15257.00
----------

Transaction ID : SB17.12901

**B. DAVID MILLNER GROUP, LLC**

Mailing Address 2055 NW DIAMOND CREEK WAY

City	State	Zip Code
JENSEN BEACH	FL	34957

Purpose of Disbursement  
MEDIA BUY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2014

Amount of Each Disbursement this Period

54189.00
----------

Transaction ID : SB17.12862

**C. NICHOLAS EAGLE**

Mailing Address 151 SUMMERSET DR

City	State	Zip Code
APOPKA	FL	32712

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

78.66
-------

Transaction ID : SB17.12894

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

69524.66

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NICHOLAS EAGLE**

Mailing Address 151 SUMMERSET DR

City	State	Zip Code
APOPKA	FL	32712

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

56.25
-------

Transaction ID : SB17.12895

**[MEMO ITEM]****B. NICHOLAS EAGLE**

Mailing Address 151 SUMMERSET DR

City	State	Zip Code
APOPKA	FL	32712

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

Amount of Each Disbursement this Period

310.77
--------

Transaction ID : SB17.12922

**C. NICHOLAS EAGLE**

Mailing Address 151 SUMMERSET DR

City	State	Zip Code
APOPKA	FL	32712

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

Amount of Each Disbursement this Period

269.66
--------

Transaction ID : SB17.12923

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

310.77

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NICHOLAS EAGLE**

Mailing Address 151 SUMMERSET DR

City	State	Zip Code
APOPKA	FL	32712

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2014

Amount of Each Disbursement this Period

31.28
-------

Transaction ID : SB17.13016

**B. HAMILTON COUNTY FARM BUREAU**

Mailing Address 1117 US HWY 41 NW

City	State	Zip Code
JASPER	FL	32052

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		28		2014

Amount of Each Disbursement this Period

150.00
--------

Transaction ID : SB17.13018

**C. NATHAN HARVEY**

Mailing Address 270 E ECHO ST

City	State	Zip Code
LAKE ALFRED	FL	33850

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

198.41
--------

Transaction ID : SB17.12891

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

379.69



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NATHAN HARVEY**

Mailing Address 270 E ECHO ST

City	State	Zip Code
LAKE ALFRED	FL	33850

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2014

Amount of Each Disbursement this Period

319.98
--------

Transaction ID : SB17.12982

**B. NATHAN HARVEY**

Mailing Address 270 E ECHO ST

City	State	Zip Code
LAKE ALFRED	FL	33850

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2014

Amount of Each Disbursement this Period

220.01
--------

Transaction ID : SB17.12983

[MEMO ITEM]

**C. PUBLIX SUPERMARKETS, INC.**

Mailing Address 5801 SOUTHWEST 75TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2014

Amount of Each Disbursement this Period

70.23
-------

Transaction ID : SB17.12984

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

319.98

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WALMART**

Mailing Address 3570 SOUTHWEST ARCHER ROAD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2014

Amount of Each Disbursement this Period

6.86
------

Transaction ID : SB17.12985

[MEMO ITEM]

**B. DOLLAR TREE STORES, INC**

Mailing Address 1034 NORTHWEST 76TH BLVD

City	State	Zip Code
GAINESVILLE	FL	32606

Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2014

Amount of Each Disbursement this Period

10.60
-------

Transaction ID : SB17.12986

[MEMO ITEM]

**C. NATHAN HARVEY**

Mailing Address 270 E ECHO ST

City	State	Zip Code
LAKE ALFRED	FL	33850

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

70.78
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Transaction ID : SB17.12996

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

70.78
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LAURA JACKSON**

Mailing Address 6470 SOUTHEAST 60TH AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

City	State	Zip Code
TRENTON	FL	32693

Amount of Each Disbursement this Period

306.27
--------

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Transaction ID : SB17.12896

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. UPS STORE**

Mailing Address 5745 SOUTHWEST 75TH STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

City	State	Zip Code
GAINESVILLE	FL	32608

Amount of Each Disbursement this Period

14.47
-------

Purpose of Disbursement  
SHIPPING

001

Transaction ID : SB17.13031

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. UNITED STATES POST OFFICE**

Mailing Address 4600 SOUTHWEST 34TH STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

City	State	Zip Code
GAINESVILLE	FL	32608

Amount of Each Disbursement this Period

5.60
------

Purpose of Disbursement  
POSTAGE

001

Transaction ID : SB17.13032

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

306.27

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WALMART**

Mailing Address 3570 SOUTHWEST ARCHER ROAD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
TELEPHONE SERVICE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

286.20
--------

Transaction ID : SB17.13033

**[MEMO ITEM]****B. LAURA JACKSON**

Mailing Address 6470 SOUTHEAST 60TH AVENUE

City	State	Zip Code
TRENTON	FL	32693

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

Amount of Each Disbursement this Period

39.00
-------

Transaction ID : SB17.12918

**C. LAURA JACKSON**

Mailing Address 6470 SOUTHEAST 60TH AVENUE

City	State	Zip Code
TRENTON	FL	32693

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2014

Amount of Each Disbursement this Period

64.55
-------

Transaction ID : SB17.13013

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

103.55

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UNITED STATES POST OFFICE**

Mailing Address 4600 SOUTHWEST 34TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2014

Amount of Each Disbursement this Period

10.52
-------

Transaction ID : SB17.13014

[MEMO ITEM]

**B. OFFICE DEPOT**

Mailing Address 6861 WEST NEWBERRY ROAD

City	State	Zip Code
GAINESVILLE	FL	32605

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2014

Amount of Each Disbursement this Period

54.03
-------

Transaction ID : SB17.13015

[MEMO ITEM]

**C. KB STRATEGIC GROUP**

Mailing Address PO BOX 101682

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2014

Amount of Each Disbursement this Period

2250.00
---------

Transaction ID : SB17.13028

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2250.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MICHAEL ROACH, INC.**

Mailing Address 2401 NW 66TH CT

City	State	Zip Code
GAINESVILLE	FL	32653

Purpose of Disbursement  
PRINTING AND POSTAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2014

Amount of Each Disbursement this Period

9395.84

Transaction ID : SB17.12909

**B. MISTY MORNING HOUNDS**

Mailing Address 9243 SE CR 2082

City	State	Zip Code
GAINESVILLE	FL	32641

Purpose of Disbursement  
EVENT FACILITY RENTAL

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2014

Amount of Each Disbursement this Period

1275.31

Transaction ID : SB17.12908

**C. MADALINA ANN MOTT**

Mailing Address 2330 SW WILLISTON RD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

86.85

Transaction ID : SB17.12890

**SUBTOTAL** of Disbursements This Page (optional).....

10758.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MADALINA ANN MOTT**

Mailing Address 2330 SW WILLISTON RD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

Amount of Each Disbursement this Period

760.80
--------

Transaction ID : SB17.12920

**B. MADALINA ANN MOTT**

Mailing Address 2330 SW WILLISTON RD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

Amount of Each Disbursement this Period

511.25
--------

Transaction ID : SB17.12921

[MEMO ITEM]

**C. MADALINA ANN MOTT**

Mailing Address 2330 SW WILLISTON RD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

290.93
--------

Transaction ID : SB17.12997

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1051.73

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MADALINA ANN MOTT**

Mailing Address 2330 SW WILLISTON RD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

269.44
--------

Transaction ID : SB17.12998

[MEMO ITEM]

**B. KANGAROO EXPRESS**

Mailing Address 3509 SOUTHWEST WILLISTON ROAD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

13.00
-------

Transaction ID : SB17.12999

[MEMO ITEM]

**C. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		10		2014

Amount of Each Disbursement this Period

5.63
------

Transaction ID : SB17.12852

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

5.63
------

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CC TRANSACTION FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

4.50
------

Transaction ID : SB17.12853

**B. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CC TRANSACTION FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2014

Amount of Each Disbursement this Period

23.40
-------

Transaction ID : SB17.12854

**C. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CC TRANSACTION FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		16		2014

Amount of Each Disbursement this Period

4.50
------

Transaction ID : SB17.12855

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

32.40

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 66 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOORCity State Zip Code  
SAN FRANCISCO CA 94105Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		18		2014

Amount of Each Disbursement this Period

11.25
-------

Transaction ID : SB17.12856

**B. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOORCity State Zip Code  
SAN FRANCISCO CA 94105Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2014

Amount of Each Disbursement this Period

1.13
------

Transaction ID : SB17.12857

**C. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOORCity State Zip Code  
SAN FRANCISCO CA 94105Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		21		2014

Amount of Each Disbursement this Period

22.50
-------

Transaction ID : SB17.12858

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

34.88

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOORCity State Zip Code  
SAN FRANCISCO CA 94105Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
08	22	2014

Amount of Each Disbursement this Period

2.26
------

Transaction ID : SB17.12859

**B. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOORCity State Zip Code  
SAN FRANCISCO CA 94105Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
08	25	2014

Amount of Each Disbursement this Period

146.25
--------

Transaction ID : SB17.12860

**C. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOORCity State Zip Code  
SAN FRANCISCO CA 94105Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
08	26	2014

Amount of Each Disbursement this Period

6.75
------

Transaction ID : SB17.12861

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

155.26

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CC TRANSACTION FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

4.50
------

Transaction ID : SB17.13020

**B. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CC TRANSACTION FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

2.25
------

Transaction ID : SB17.13021

**C. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CC TRANSACTION FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		16		2014

Amount of Each Disbursement this Period

3.38
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Transaction ID : SB17.13022

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

10.13

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOORCity State Zip Code  
SAN FRANCISCO CA 94105Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	18	2014

Amount of Each Disbursement this Period

11.25
-------

Transaction ID : SB17.13023

**B. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOORCity State Zip Code  
SAN FRANCISCO CA 94105Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	22	2014

Amount of Each Disbursement this Period

7.88
------

Transaction ID : SB17.13024

**C. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOORCity State Zip Code  
SAN FRANCISCO CA 94105Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	28	2014

Amount of Each Disbursement this Period

11.25
-------

Transaction ID : SB17.13025

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

30.38
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 70 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOORCity State Zip Code  
SAN FRANCISCO CA 94105Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		29		2014

Amount of Each Disbursement this Period

4.50
------

Transaction ID : SB17.13026

**B. PIRYX, INC.**Mailing Address 144 SECOND STREET  
FIRST FLOORCity State Zip Code  
SAN FRANCISCO CA 94105Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2014

Amount of Each Disbursement this Period

1.13
------

Transaction ID : SB17.13027

**C. PROFESSIONAL DATA SERVICES, INC.**

Mailing Address 2470 DANIELL'S BRIDGE RD, STE 121

City State Zip Code  
ATHENS GA 30606Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		01		2014

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB17.12979

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2005.63

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 71 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. STRATEGIC IMAGE MANAGEMENT, LLC**

Mailing Address 511 W BAY ST, STE 350

City	State	Zip Code
TAMPA	FL	33606

Purpose of Disbursement  
DIRECT MARKETING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

24261.70
----------

Transaction ID : SB17.12866

**B. STRATEGIC IMAGE MANAGEMENT, LLC**

Mailing Address 511 W BAY ST, STE 350

City	State	Zip Code
TAMPA	FL	33606

Purpose of Disbursement  
CAMPAIGN STRATEGY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		01		2014

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB17.12981

**C. SUNTRUST BANK**

Mailing Address 5303 SOUTHWEST 91ST DRIVE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2014

Amount of Each Disbursement this Period

50.00
-------

Transaction ID : SB17.12897

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

26311.70

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 72 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SUNTRUST BANK**

Mailing Address 5303 SOUTHWEST 91ST DRIVE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		19		2014

Amount of Each Disbursement this Period

50.00
-------

Transaction ID : SB17.13039

**B. SUREPAYROLL, INC.**Mailing Address 2350 RAVINE WAY  
SUITE 100

City	State	Zip Code
GLENVIEW	IL	60025

Purpose of Disbursement  
PAYROLL TAXES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

277.25
--------

Transaction ID : SB17.12881

**C. SUREPAYROLL, INC.**Mailing Address 2350 RAVINE WAY  
SUITE 100

City	State	Zip Code
GLENVIEW	IL	60025

Purpose of Disbursement  
PAYROLL(SEE MEMO)

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

3375.19
---------

Transaction ID : SB17.12882

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3702.44



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 73 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. KATHRYN CAMMACK**

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

1057.69
---------

Transaction ID : SB17.12883

[MEMO ITEM]

**B. MADALINA ANN MOTT**

Mailing Address 2330 SW WILLISTON RD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.12884

[MEMO ITEM]

**C. NATHAN HARVEY**

Mailing Address 270 E ECHO ST

City	State	Zip Code
LAKE ALFRED	FL	33850

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.12885

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RAISA ALSTODT**

Mailing Address 7629 SW 19TH PL

City	State	Zip Code
GAINESVILLE	FL	32607

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.12886

**[MEMO ITEM]****B. NICHOLAS EAGLE**

Mailing Address 151 SUMMERSET DR

City	State	Zip Code
APOPKA	FL	32712

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.12887

**[MEMO ITEM]****C. LAURA JACKSON**

Mailing Address 6470 SOUTHEAST 60TH AVENUE

City	State	Zip Code
TRENTON	FL	32693

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

717.50
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Transaction ID : SB17.12888

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 75 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SUREPAYROLL, INC.**Mailing Address 2350 RAVINE WAY  
SUITE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement  
PAYROLL TAXES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	26	2014

Amount of Each Disbursement this Period

268.93

Transaction ID : SB17.12910

**B. SUREPAYROLL, INC.**Mailing Address 2350 RAVINE WAY  
SUITE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement  
PAYROLL(SEE MEMO)

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	26	2014

Amount of Each Disbursement this Period

3297.69

Transaction ID : SB17.12911

**C. KATHRYN CAMMACK**

Mailing Address 8209 SOUTHWEST 95TH LANE

City GAINESVILLE State FL Zip Code 32608

Purpose of Disbursement  
SALARY

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	26	2014

Amount of Each Disbursement this Period

1057.69

Transaction ID : SB17.12912

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3566.62

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 76 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LAURA JACKSON**

Mailing Address 6470 SOUTHEAST 60TH AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

City	State	Zip Code
TRENTON	FL	32693

Amount of Each Disbursement this Period

840.00
--------

Purpose of Disbursement  
SALARY

001

Transaction ID : SB17.12913

Candidate Name

Category/  
Type**[MEMO ITEM]**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:

District:

Full Name (Last, First, Middle Initial)

**B. NATHAN HARVEY**

Mailing Address 270 E ECHO ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

City	State	Zip Code
LAKE ALFRED	FL	33850

Amount of Each Disbursement this Period

400.00
--------

Purpose of Disbursement  
SALARY

001

Transaction ID : SB17.12914

Candidate Name

Category/  
Type**[MEMO ITEM]**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:

District:

Full Name (Last, First, Middle Initial)

**C. RAISA ALSTODT**

Mailing Address 7629 SW 19TH PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

City	State	Zip Code
GAINESVILLE	FL	32607

Amount of Each Disbursement this Period

200.00
--------

Purpose of Disbursement  
SALARY

001

Transaction ID : SB17.12915

Candidate Name

Category/  
Type**[MEMO ITEM]**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 77 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MADALINA ANN MOTTL**

Mailing Address 2330 SW WILLISTON RD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.12916

[MEMO ITEM]

**B. NICHOLAS EAGLE**

Mailing Address 151 SUMMERSET DR

City	State	Zip Code
APOPKA	FL	32712

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.12917

[MEMO ITEM]

**C. SUREPAYROLL, INC.**Mailing Address 2350 RAVINE WAY  
SUITE 100

City	State	Zip Code
GLENVIEW	IL	60025

Purpose of Disbursement  
PAYROLL(SEE MEMO)

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

2370.19
---------

Transaction ID : SB17.12988

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2370.19

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 78 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. KATHRYN CAMMACK**

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

1057.69
---------

Transaction ID : SB17.12989

**[MEMO ITEM]****B. NICHOLAS EAGLE**

Mailing Address 151 SUMMERSET DR

City	State	Zip Code
APOPKA	FL	32712

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.12990

**[MEMO ITEM]****C. NATHAN HARVEY**

Mailing Address 270 E ECHO ST

City	State	Zip Code
LAKE ALFRED	FL	33850

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : SB17.12991

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 79 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MADALINA ANN MOTT**

Mailing Address 2330 SW WILLISTON RD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.12992

[MEMO ITEM]

**B. LAURA JACKSON**

Mailing Address 6470 SOUTHEAST 60TH AVENUE

City	State	Zip Code
TRENTON	FL	32693

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

262.50
--------

Transaction ID : SB17.12993

[MEMO ITEM]

**C. SUREPAYROLL, INC.**Mailing Address 2350 RAVINE WAY  
SUITE 100

City	State	Zip Code
GLENVIEW	IL	60025

Purpose of Disbursement  
PAYROLL TAXES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

193.82
--------

Transaction ID : SB17.12994

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

193.82

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 80 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SUREPAYROLL, INC.**Mailing Address 2350 RAVINE WAY  
SUITE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement  
PAYROLL TAXES

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
09	24	2014

Amount of Each Disbursement this Period

139.73

Transaction ID : SB17.13006

**B. SUREPAYROLL, INC.**Mailing Address 2350 RAVINE WAY  
SUITE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement  
PAYROLL(SEE MEMO)

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
09	24	2014

Amount of Each Disbursement this Period

1810.91

Transaction ID : SB17.13007

**C. KATHRYN CAMMACK**

Mailing Address 8209 SOUTHWEST 95TH LANE

City GAINESVILLE State FL Zip Code 32608

Purpose of Disbursement  
SALARY

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
09	24	2014

Amount of Each Disbursement this Period

1057.69

Transaction ID : SB17.13008

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1950.64



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LAURA JACKSON**

Mailing Address 6470 SOUTHEAST 60TH AVENUE

City	State	Zip Code
TRENTON	FL	32693

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2014

Amount of Each Disbursement this Period

633.22
--------

Transaction ID : SB17.13009

[MEMO ITEM]

**B. NICHOLAS EAGLE**

Mailing Address 151 SUMMERSET DR

City	State	Zip Code
APOPKA	FL	32712

Purpose of Disbursement  
SALARY

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2014

Amount of Each Disbursement this Period

120.00
--------

Transaction ID : SB17.13010

[MEMO ITEM]

**C. TELEPHONE TOWN HALL MEETING, INC,**

Mailing Address 958 CONEFLOWER DR

City	State	Zip Code
GOLDEN	CO	80401

Purpose of Disbursement  
TELEMARKETING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

Amount of Each Disbursement this Period

2054.60
---------

Transaction ID : SB17.12924

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2054.60

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 82 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TELEPHONE TOWN HALL MEETING, INC,**

Mailing Address 958 CONEFLOWER DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

City	State	Zip Code
GOLDEN	CO	80401

Amount of Each Disbursement this Period

3508.70
---------

Purpose of Disbursement  
TELEMARKETING

001

Transaction ID : SB17.12977

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. WCJB**

Mailing Address 6220 NW 43RD ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

City	State	Zip Code
GAINESVILLE	FL	32653

Amount of Each Disbursement this Period

7352.50
---------

Purpose of Disbursement  
ADVERTISING

001

Transaction ID : SB17.12899

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. WEBELECT**

Mailing Address 1256 VINETREE DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		01		2014

City	State	Zip Code
BRANDON	FL	33510

Amount of Each Disbursement this Period

504.00
--------

Purpose of Disbursement  
VOTER DATA SUBSCRIPTION

001

Transaction ID : SB17.12980

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

11365.20

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. THEODORE SCOTT YOHO**

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Category/  
Type

Candidate Name

**THEODORE YOHO**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: FL District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

Amount of Each Disbursement this Period

1609.07
---------

Transaction ID : SB17.12925

**B. CAROLYN YOHO**

Mailing Address 8209 SW 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2014

Amount of Each Disbursement this Period

242.41
--------

Transaction ID : SB17.12873

**C. VERIZON WIRELESS**

Mailing Address POST OFFICE BOX 105378

City	State	Zip Code
ATLANTA	GA	30348

Purpose of Disbursement  
TELEPHONE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2014

Amount of Each Disbursement this Period

168.13
--------

Transaction ID : SB17.12874

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1851.48

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 84 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 208 S AKARD ST

City	State	Zip Code
DALLAS	TX	75202

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2014

Amount of Each Disbursement this Period

74.28
-------

Transaction ID : SB17.12875

[MEMO ITEM]

**B. CAROLYN YOHO**

Mailing Address 8209 SW 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

Amount of Each Disbursement this Period

271.29
--------

Transaction ID : SB17.12926

**C. VERIZON WIRELESS**

Mailing Address POST OFFICE BOX 105378

City	State	Zip Code
ATLANTA	GA	30348

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

Amount of Each Disbursement this Period

126.49
--------

Transaction ID : SB17.12927

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

271.29

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 208 S AKARD ST

City	State	Zip Code
DALLAS	TX	75202

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

Amount of Each Disbursement this Period

75.46
-------

Transaction ID : SB17.12928

[MEMO ITEM]

**B. CAROLYN YOHO**

Mailing Address 8209 SW 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

Amount of Each Disbursement this Period

69.34
-------

Transaction ID : SB17.12929

[MEMO ITEM]

**C. JOHN ZANE**

Mailing Address 6716 NORTHWEST 11TH PLACE

City	State	Zip Code
GAINESVILLE	FL	32605

Purpose of Disbursement  
COMPUTER MAINTENANCE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2014

Amount of Each Disbursement this Period

132.50
--------

Transaction ID : SB17.12902

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

132.50

202775.76

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 86 OF 87

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RICHARD BIANCULLI**

Mailing Address 545 SOUTHEAST 131ST STREET

City	State	Zip Code
OCALA	FL	34480

Purpose of Disbursement  
CONTRIBUTION REFUND

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		18		2014

Amount of Each Disbursement this Period

218.90
--------

Transaction ID : SB20A.13004

**B. JACKSON STREETER**

Mailing Address 13424 SOUTHWEST 4TH LANE

City	State	Zip Code
NEWBERRY	FL	32669

Purpose of Disbursement  
CONTRIBUTION REFUND

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		18		2014

Amount of Each Disbursement this Period

2230.00
---------

Transaction ID : SB20A.13003

**C.**

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2448.90

2448.90

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 87 OF 87

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TED YOHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BOYS AND GIRLS CLUB OF ALACHUA COUNTY**

Mailing Address POST OFFICE BOX 532

City	State	Zip Code
GAINESVILLE	FL	32602

Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		17		2014

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : SB21.13002

**B. COLUMBIA COUNTY REPUBLICAN EXECUTIVE COMMITTEE**

Mailing Address 134 NORTH MARION AVENUE

City	State	Zip Code
LAKE CITY	FL	32025

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name

COLUMBIA COUNTY REPUBLICAN EXECUTIVE COMMITTEE

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

360.00
--------

Transaction ID : SB21.12900

**C. CURT CLAWSON- THE OUTSIDER FOR CONGRESS COMMITTEE**

Mailing Address 8951 BONITA BEACH RD STE 525-V2014

City	State	Zip Code
BONITA SPRINGS	FL	34135

Purpose of Disbursement  
POLITICAL CONTRIBUTION-SPECIAL PRIMARY DEBT RETIREMENT

011

Candidate Name

CURTIS CLAWSON

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify)

State: FL

District: 19

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2014

Amount of Each Disbursement this Period

1000.00
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Transaction ID : SB21.13029

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1560.00

1560.00